

**STATE OF DELAWARE**  
**SINGLE POINT OF CONTACT – SPOC**  
**INTERGOVERNMENTAL REVIEW OF FEDERAL PROGRAMS**  
Office of Management and Budget  
Haslet Building, 3<sup>rd</sup> Floor, Dover, Delaware 19901  
(302) 739-4206

<b>1. STATE APPLICATION IDENTIFIER:</b> <div style="font-size: 24px; font-family: cursive;">89-05-21-08</div>		<b>SPOC use ONLY</b>	Month	Reviewer <div style="font-size: 24px; font-family: cursive;">EF</div>	CC's
<b>2. Applicant Project Title:</b> University of Delaware Avian Zoonotic Medicine Laboratory					
<b>3. Applicant Department:</b> University of Delaware			<b>4. Applicant Division/APU:</b>		
<b>5. Applicant Address:</b> Hullen Hall					
<b>6. Contact Person:</b> Dr. Daniel Rich, Provost			<b>7. Contact Person's Phone Number:</b> (302) 831-2136		
<b>8. Signature of Secretary or Agency Head (for state agencies) or Chief Administrator (for all other applicants)</b>					
<b>9. Federal Grantor Department:</b> National Institutes of Health			<b>10. Federal Sub-Agency:</b> National Center for Research Resources		
<b>11. Federal Contact Person:</b> Willie McCullough, Ph.D.			<b>12. Phone Number:</b> (301) 435-0766		
<b>13. Address:</b> National Center for Research Resources, Democracy One, Room 940, 6701 Democracy Boulevard, Bethesda, MD 20892-4874					
<b>14. Federal Program Title:</b> <i>Recovery Act Limited Competition – Extramural Research Facilities Improvement Program (C06)</i>			<b>15. FEDERAL CATALOG NO:</b> (CFDA) <div style="display: flex; justify-content: space-between;"><span>93</span><span>702</span></div> <div style="text-align: right; font-size: 24px; font-family: cursive;">y</div>		
<b>16. Project Description:</b> <i>The University of Delaware is requesting \$15M in support to build a new Avian Zoonotic Medicine Laboratory to be located at the Elbert N. and Ann V. Carvel Research and Education Center in Georgetown, DE. The new 21,000 sq ft laboratory will contain BSL2/3 animal facilities as well as BSL2 and BSL3 laboratories, all designed to support avian zoonotic medicine and related food safety translational research that bridges avian and human medicine with public health.</i>					
<b>17. Will funds be utilized for any technology initiatives?</b> <input type="checkbox"/> Yes <input type="checkbox"/> No <b>If so, Business Case Number and brief project summary:</b> <div style="font-size: 24px; font-family: cursive;">N/A</div>					
<b>18. Measurable Objectives:</b> <b>a. What were last year's objectives?</b> <div style="font-size: 24px; font-family: cursive;">N/A</div>					
<b>b. Were these objectives met? (If not, please explain why)</b> <div style="font-size: 24px; font-family: cursive;">N/A</div>					
<b>c. What are this year's objectives?</b> <div style="font-size: 24px; font-family: cursive;">N/A</div>					

5/21/

<b>19. Grant Period:</b>  From: 09/01/2009  To: 08/31/2013	<b>20. How many years has this project been funded:</b>  <i>Not awarded yet - Limited Competition under ARRA</i>	<b>21. If the project was funded last year, how much federal money was awarded?</b>  <i>N/A</i>
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<b>22. Source of funding for this application:</b>	Dollars
a. Federal grant	\$15,000,000
b. Other federal funds (Specify source of funding)	
c. Required state contribution (Specify source of funding)	
d. Discretionary state contribution (Specify source of funding)	
e. Required local contribution (Specify source of funding)	
f. Other non- federal funds (Specify source of funding)	
<b>TOTAL</b>	<b>\$15,000,000</b>

  

23. Budget by cost category and source:	Federal Funds	State Funds	Other Funds	Total Funds
Salaries & Fringe Benefits				
Personal or Contractual Services				
Travel				
Supplies & Materials				
Capital Expenditures	\$15,000,000	\$0		\$15,000,000
Audit Fees				
Indirect Costs				
Other				
<b>TOTAL</b>	<b>\$15,000,000</b>			<b>\$15,000,000</b>

  

<b>24. How many positions are required for the project? (Exclude casual/seasonal employees)</b>			
Breakdown of position(s)	Authorized in State Budget	New Positions Required	Total
Paid for out of federal funds			
Paid for out of General Funds			
Paid for out of state special funds			
Paid for out of bond/local/other funds			
<b>TOTAL</b>			

  

<b>25. PLEASE NOTE:</b> On a separate piece of paper, please give position number, grade, yearly salary and percent of funding (federal, state, local, other) and the full-time equivalent for all positions required. Please identify the new positions by placing an asterisk before the position title. If this grant funds positions within other departments, divisions and/or offices, please list them. If a position has been reallocated to or from another grant please indicate the grant source.
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